

STATE OF MICHIGAN
JUDICIAL CIRCUIT
COUNTYUNIFORM CHILD SUPPORT ORDER
(PAGE 1)
☐ MODIFICATION

CASE NO.

Court address

FAX no.

Court telephone no.

Plaintiff's name, address, and telephone no.

Defendant's name, address, and telephone no.

v

Plaintiff's attorney name, address, telephone no., and bar no.

Defendant's attorney name, address, telephone no., and bar no.

Plaintiff's source of income name, address, and telephone no.

Defendant's source of income name, address, and telephone no.

- ☐ The friend of the court recommends support be ordered as follows. If you disagree with this recommendation, you must file a written objection with _____ on or before 21 days from the date this order is mailed. If you do not object, this proposed order will be presented to the court for entry.

UNLESS OTHERWISE ORDERED in item 13: ☐ standard provisions have been modified (see item 13)

- This order continues until each child is age 18 or graduates from high school, as provided by MCL 552.605b, whichever is later, but no longer than age 19 1/2. Child care for each child continues through August 31 following each child's 12th birthday.
- Income withholding takes immediate effect. Payments shall be made through the State Disbursement Unit or the friend of the court as ordered by the court.
- Child Support.** The payer has a monthly child support obligation as follows:

Payer:		Payee:		Support eff. date: Child care eff. date:	
Children's names and birth dates:					
Children supported:	1 child	2 children	3 children	4 children	5 or more children
Base support:	\$	\$	\$	\$	\$
Ordinary medical:	\$	\$	\$	\$	\$
Child care:	\$	\$	\$	\$	\$
Other:	\$	\$	\$	\$	\$
Total:	\$	\$	\$	\$	\$

☐ Base support shall abate 50% after 6 consecutive overnights with the payer.
☐ Base support includes a net health care premium adjustment of \$_____, ☐ subject ☐ not subject to abatement.
☐ Support was set based on the shared economic responsibility formula using _____ overnights of parenting time for the payer.
 The above ordered support provisions ☐ do ☐ do not follow the child support formula.

(see Page 2 for remainder of order)

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4. **Insurance.** For the benefit of the children, ☐ plaintiff ☐ defendant shall maintain health care coverage through an insurer [as defined in MCL 552.602(o)] that includes payment for hospital, dental, optical, and other medical expenses when that coverage is available at a reasonable cost, including coverage available as a benefit of employment or under an individual policy
☐ up to a maximum of \$_____ for plaintiff. ☐ up to a maximum of \$_____ for defendant.
☐ not to exceed 5% of the plaintiff's/defendant's gross income.
5. **Uninsured Medical Expenses.** All uninsured health care expenses exceeding the ordinary medical amount will be paid _____% by the plaintiff and _____% by the defendant. Uninsured expenses exceeding the ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court. The ordinary medical amount is \$_____ year.
6. **Qualified Medical Support Order.** This order is a qualified medical support order under 29 USC 1169. To qualify this order, the friend of the court shall issue a notice to enroll under MCL 552.626b. A parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable cost.
7. **Retroactive Modification, Surcharge for Past Due Support, and Liens for Unpaid Support.** Support is a judgment the date it is due and is not modifiable retroactively. A surcharge will be added to past due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues for more than the periodic support payments payable for two months under the payer's support order.
8. **Change of Address, Employment Status, Health Insurance.** Both parties shall notify the friend of the court in writing, within 21 days of any change in: a) their mailing or residence address and telephone number; b) the name, address, and telephone number of their sources of income; c) their health maintenance or insurance company, insurance coverage, persons insured, or contract number; d) their occupational or driver licenses; and e) their social security number unless exempt by law under MCL 552.603.
9. **Redirection and Abatement:** Subject to statutory procedures, the friend of the court : 1) may redirect support paid for a child to the person who is legally responsible for that child; 2) shall abate support charges for a child who resides on a full-time basis with the payer of support; or 3) shall redirect support to the Department of Human Services for a child placed in foster care.
10. **Fees.** The payer of support shall pay statutory and service fees as required by law.
11. **Review.** Each party to a support order may submit a written request to have the friend of the court review the order. The friend of the court is not required to investigate more than 1 request received from a party each 36 months. A party may also file a motion to modify this support order.
12. **Prior Orders.** Except as changed in this order, prior provisions remain in effect. Support payable under any prior order is preserved.
13. **Other: (attach separate sheets as needed)**

IT IS SO ORDERED:

Plaintiff (if consent/stipulation)

Date

Defendant (if consent/stipulation)

Date

Date

Judge

Bar no.

CERTIFICATE OF MAILING

I certify that on this date I served a copy of this order on the parties and their attorneys by first class mail addressed to their last known addresses as defined in MCR 3.203.

Date

Signature